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CONFIRMATION NO. 4769

<b>SERIAL NUMBER</b> 10/679,971	<b>FILING OR 371(c) DATE</b> 10/06/2003 <b>RULE</b>	<b>CLASS</b> 713	<b>GROUP ART UNIT</b> 2132	<b>ATTORNEY DOCKET NO.</b> 493-37-3
<b>APPLICANTS</b> Robert M. Best, Fort Myers, FL;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/639,038 08/11/2003 ABN and is a CIP of 10/613,902 07/03/2003 ABN and is a CIP of 10/427,793 04/30/2003 PAT 7,278,031 and is a CIP of 10/135,319 04/29/2002 ABN				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 12/30/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 22	<b>TOTAL CLAIMS</b> 69
<b>INDEPENDENT CLAIMS</b> 7				
<b>ADDRESS</b> 996				
<b>TITLE</b> SECURE EXECUTION OF DOWNLOADED SOFTWARE				
<b>FILING FEE RECEIVED</b> 1264	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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